8985-0051



1PW

**PATENT** 

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.:	10/587,405	) CERTIFICATE OF MAILING  L hereby certify that this correspondence is being
Applicant:	Luc Martin	I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope
Filing Date:	January 27, 2005	<ul> <li>addressed to: Commissioner of Patents, P.O. Box</li> <li>1450, Alexandria, Virginia, 22313-1450, on this 11</li> <li>day of July 2008.</li> </ul>
Title:	On Demand Provisioning of Applications	) Jeffrey S. Sokol

## RESPONSE TO NOTICE OF MISSING PARTS

Mail Stop: Missing Parts Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The Notice of Missing Parts mailed June 5, 2008 indicated that the Oath or Declaration was missing from the Office file. An original signed Declaration for the subject application is attached. A check for \$65.00 is also enclosed. The Commissioner is hereby authorized to charge payment of any additional fee associated with this communication to Deposit Account No. 503729. A duplicate copy of this transmittal is enclosed for that purpose. Please indicate receipt hereof by returning the enclosed postcard.

Respectfully submitted,

Dated:

7/11/08

Jeffrey 8. Sokol, Reg. No. 35,686

Cook & Franke S.C. 660 East Mason Street Milwaukee, WI 53202

(414) 271-5900

07/15/2008 WASFAW1 00000064 10587405

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PTO/SB/17 (12-04)

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Fees pursuant to the Consolida			IΔ	oplication Num	ber	10/587,405		
FEE TR	ANS	MIIIAL	_ Fi	ling Date		January 27,2	.005	
For	FY 20	005	Fi	rst Named Inve	entor	Luc Martin		
✓ Applicant claims small entity status. See 37 CFR 1.27				kaminer Name				
Applicant claims small	· · · · ·		A	t Unit				
TOTAL AMOUNT OF PAYN	IENT (\$)	\$65.00	At	tomey Docket	No.	<u>8985-0051</u>		
METHOD OF PAYMENT	(check all	that apply)						
Check Credit C	ard N	Aonay Order	None	Other (n	lesce ide	nifu)*		
Deposit Account De			None	Other (p.	No	me: Cook & Frank	œ S.C.	
			hereby					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee								
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under 37 CFR	1.16 and 1.	(s) or underpayments of 17	oi iee(s)	✓ Credit	_			
WARNING: Information on this Information and authorization of	·		d inform	ation should no	ot be incl	uded on this form. Pro	ovide credit card	
FEE CALCULATION								
1. BASIC FILING, SEAR	CH, AND I	EXAMINATION FEE	ES					
	FILING F	FEES SE	EARCH		EXAM	INATION FEES		
Application Type	<u>S</u> Fee (\$)	mall Entity Fee (\$) Fe	<u>se (\$)</u>	mall Entity Fee (\$)	Fee (	Small Entity  S Fee (\$)	Fees Paid (\$)	
Utility	300		00	250	200			
Design	200	100 10	00	50	130	65		
Plant	200	100 30	00	150	160	80		
Reissue	300	150 50	00	250	600	300		
Provisional	200	100	0	0	0	0	•	
2. EXCESS CLAIM FEES	3						Small Entity	
Fee Description Each claim over 20 or, for	· Paissuas	each claim over 20	and me	ore than in th	ne Arigii	nal natent	Fee (\$) Fee (\$) 50 25	
Each independent claim o								
Multiple dependent claims			p			F	360 180	
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- 20 = HP = highest number of total cl	laims paid for	if greater than 20		0.00	<u>Fee</u>	(\$) <u>Fee Page 1</u>	<u>aid (\$)</u>	
Indep. Claims	xtra Claims	•	ee Paic	I (\$)		<u> </u>		
= 3 = HP = highest number of indepe	ndent claims	x =	\$(	0.00				
·		paid for, if greater than o						
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)								
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
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100 = / 50 = (round up to a whole number) x								
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)							Fees Paid (\$)	
Other: Missing Parts: Declaration							\$65.00	
Office, Missing Fd		U, U(IVII				<del></del>	<u> </u>	

SUBMITTED BY Registration No. (Attorney/Agent) Telephone 414-271-5900 35,686 Signature Name (Print/Type) Jeffrey S. Solvot Date 07/11/2008 This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the

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Under in	TE HADEIWOIK ROOM LIVER OF TABLE	IN DELOCATION	Application Number	10/587			
1	TRANSMITTAL		Filing Date		ry 27, 2005		
	FORM		First Named Inventor	Luc M			
			Art Unit	1			
			Examiner Name				
	ed for all correspondence after initial	filing) 5	Attorney Docket Number	8985-0	0051		
Total Numi	nber of Pages in This Submission						
		ENC	LOSURES (Check all	that apply			
Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request		Drawing(s) Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Landscape Table on CD		After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter Other Enclosure(s) (please Identify below):  Return Receipt Postcard Original Declaration (4 pages)			
	21000						
Ci Nama	SIGNA	TURE C	OF APPLICANT, ATTO	RNEY, C	)R AGENT		
Firm Name	Cook & Franke S.C.						
Signature							
Printed name	Jeffrey S. Sokol	Jeffrey S. Sokol					
Date	07/11/2008 Reg.			Reg. No.	35,686		
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